# **Planning Together**

# **Engaging Families as Partners on Planning and Treatment Teams**

There are many benefits to involving families in the planning and provision of services for the child who is being staffed by a Family Assessment and Planning Team (FAPT). Families who are engaged are more likely to be actively involved in the process of building on family strengths to reach positive outcomes. These families often become more involved in the implementation of the treatment plan. Although it is sometimes challenging to get families involved, the benefits are well worth the effort.

#### **Before the First Team Meeting**

Whenever possible, prepare families ahead of time with information about who will be a part of the planning team, and the role of each person and agency. State the purpose of the meeting. Emphasize that the parents bring helpful information about the child and that all members of the team are seeking the same thing - positive outcomes!

When you first meet with parents, keep in mind that they probably have had a difficult time seeking your services. They may have told their story over and over again to service providers. They may be afraid, frustrated, and exhausted. They may be angry or have feelings of hopelessness. They may also feel that answering questions may make them vulnerable to negative consequences. They may not want to share information with public agencies in fear that the information will be used against them.

It is important to let families know that you care about them and about working together to create a better life for them and their child. Let them know from the beginning that you view them as partners in their child's treatment - and that you value their input and knowledge. Parents are the most essential members of the team!

Parents often feel that their concerns are not important. Listening to them at the first visit is an important first step in creating a trusting relationship.

Whenever possible, connect the parent representative on the team with the parents who are attending in advance of the team meeting. If you are the key contact with the family, you can ask the parents ahead of time if they want to talk with another parent who will be on the interagency team. If both parties agree, it is a good opportunity for the parent representative to explain what will take place at the meeting, answer questions, and listen to their story.

"I always go to the parents' house before we actually go to their first FAPT meeting. I introduce myself, and tell them that I am there to answer questions. Then, when they go to the meeting, they already know me! I'm lucky because my CSA [Comprehensive Services Act] coordinator always sets this up for me. It works for me because I work nights so it is easier for me to attend team meetings."

- A father on a FAPT team

### On the Day of the Meeting

Make sure that the parents have childcare and transportation to the meeting. On the day before the meeting, it is helpful to call or visit their home to remind them of the meeting and to ask if they have questions or concerns. When parents arrive at the meeting, greet them warmly and introduce them to the members of the team. Some teams use name tags, table tents, and participants' lists to make it easy for parents to know who participants are and the agency that they represent.

To ensure meaningful participation, be aware of language differences or barriers. Enlist an interpreter, if necessary to facilitate effective communication. In addition, be sensitive to the ability of parents to read information that you present. Many parents cannot read or they may have low-level reading skills. Adapt your work to accommodate their needs in a way that won't affect their dignity.

Be aware of jargon! Often, it is very difficult for parents to understand the language of service providers. Acronyms and jargon should be avoided, and explanations of the services available should be fully described to parents.

Whenever possible, include the target child in the planning meetings to get his or her views and to involve the child as a part of the treatment plan.

Acknowledge the possibility of isolation and encourage families to reach out to others for their own support. Link families to local parent groups or to other families who are willing to share their stories and to provide informal support to families.

During the meeting, ask how the other family members are dealing with the child's problems - often siblings, grandparents, and other individuals are deeply affected. Remember that along with caring for the target child, families have a multitude of responsibilities - including caring for other family members, work, school, and other duties. Asking how others are coping can be significant to gaining a complete understanding of issues the family is facing - and often can be incorporated into the treatment plan.

#### **Building a Strength-Based Plan**

Parents appreciate the opportunity to express their hopes and dreams for their child. Begin every meeting by asking about what is going well - even if it is something small. Identify family strengths - perhaps it is relationships within their faith community, family dinner hour, celebrations of birthdays and special events - anything that brings positive benefits to the family. Help identify those strengths and build on them!

Parents appreciate honest, realistic information about options for their child, as well as other possible resources for support and services.

Treatment plans should be flexible, culturally effective (language, ethnicity, education) and should include the entire family whenever possible.

Identify the informal supports to the family, such as kin, clergy, and community - anyone who is part of the natural network of the family - and incorporate them in the plan whenever possible.

Often, parents will go to the school to request additional services or will reach out to members of the community in addition to working with an interagency team. Ask if the parents have people that they feel comfortable going to for assistance or advice - and consider ways those persons can provide input into the process of planning and delivering services.

Share data with families on outcomes for treatment interventions and promising practices. Never underestimate their ability to grasp and relate to data-driven interventions. Include anecdotal information, such as "We had two young men complete this program recently and they both returned to their home school afterwards." Be honest and realistic in your comments. While it is good to always build on the

hopes and dreams of families, families need to be able to trust the team. Sometimes, interventions aren't successful - and the family needs to feel safe and comfortable coming back to the team to explore other options.

In developing a plan, be sure that each goal is measurable. The goals should be short, easy to comprehend, and flexible enough to change if necessary.

Whenever possible, link parents with outside resources and informal supports, such as advocacy organizations, other parents, and community groups that may be able to provide families education and support.

#### Be creative and positive!

If it seems as though the parents are not responsive, it is possible that you may be misinterpreting what appears to be their lack of involvement. Talk to the parents to determine if there is a lack of involvement or lack of understanding. Sometimes, the information you have presented is difficult to understand - make sure that they have the resources they need to understand how systems of care operate, how they can best help their child, and what treatment options are available. Try to determine if other issues are impacting the parents' ability to participate in the process in a positive way. For example, they may have had logistical problems getting to the meeting - with childcare, lack of transportation, or work schedules. Ask how you can help them make the most of the meeting and make it easier for them to attend the next time.

Sometimes you can use the parent representative on the team to help the family solve barriers to participation. If this isn't practical, make sure that one person on the team is responsible for having this discussion with the family in a positive way. It is always best to have one main contact person for the family to assist in building positive, trusting relationships.

Thank the parents for their participation in the meeting - even if they seemed uncooperative. You are setting the stage for future meetings - and exhibiting your interest in their success.

Always be aware that the family's culture, ethnicity, religious beliefs, and language needs are central to the process of engaging them as partners.

Seek ways to connect families with other families of children in similar circumstances if they want peer-to-peer support, support groups, family newsletters, or Web sites.

Ask parents about what they want to work on immediately - what behaviors do they believe are most critical to their child's success.

Help the family with record keeping - create a file of information, names, and telephone numbers that they may need. It may help to prepare a notebook that includes a calendar of appointments, a list of team members, and a copy of the child's treatment plan. The names and numbers of family support organizations should always be included.

ALWAYS explore family strengths, values, and assets. These are the steppingstones to creating a plan.

If stress occurs, remember you may take a break, and remind the group that all of the participants on the treatment team have the same goals - improved health, safety, and quality of life for the child and family!

Keep your sense of humor - and encourage celebration of successes with your team.

"The day of our FAPT meeting is always one of the best days of the year for me. I can't believe that this group of people, even from agencies we don't need services from, come together to help come up with ideas of things that might help our daughter. They are all so positive - I look forward to seeing them every year."

Mother
Henrico County

## For more information please visit the Office of Comprehensive Services' Web site at http://www.csa.state.va.us/

\* "Parents" referenced in this document means the adults with primary responsibility for the care and well being of a child. A "parent" can include parents by birth or adoption, grandparents, guardians, foster parents, or surrogate parents. "Family" refers to the community of kin as defined by the child and parents you are working with. This can include cousins, aunts, uncles, friends, foster parents, or anyone else in the nucleus of care for the child.

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